## FORM D RECEIVED SEP 1 8 2007 NO

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D
SECTION 4(6), AND/OR
NIFORM LIMITED OFFERING EXEMPTION

1412921

SEC USE ONLY						
Prefix	Serial					
<u> </u>						
DATE RECI	EIVED					
1						
1	·					

~	<u></u>		
Name of Offering (check if this is	s an amendment and name has changed, and inc	dicate change.)	- <del> </del>
Class B Units			
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505	Rule 506 ☐ Section 4	4(6) ULOE
Type of Filing: New Filing	Amendment		
	A. BASIC IDENTIFICATION D	ATA	
1. Enter the information requested about the			
·—·	endment and name has changed, and indicate of	hange.)	
MFR Partners V, LLC			
Address of Executive Offices	(Number and Street, City, State, Zip Co		ncluding Area Code)
735 Lake Street East, Wayzata, MN	55391	612-605-0704	
Address of Principal Business Operations	PROCESSEDet, City, State, Zip Co	ode) Telephone Number	1 1990 <b>- 1</b> 00 1990 1991 1991 1991 1991 1991 1991
(if different from Executive Offices)	PHUCESSLP		
Brief Description of Business	2007		1 10 0 00 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Real Estate Investment	SEP 2 4 2007		07078191
	THOMSON		0,0,0
Type of Business Organization	FINANCIAL	<b>57</b>	X 12 % 141 1 112
☐ corporation	☐ limited partnership, already formed	other (please specify	y): limited liability
☐ business trust	☐ limited nown seeking to be forward	company	
☐ business trust	limited partnership, to be formed		
Actual or Estimated Data of Incompantion	or Organization: Month Year		mated
Actual or Estimated Date of Incorporation	on: (Enter two-letter U.S. Postal Service abbre		mateu
Junisdiction of incorporation of Organization	CN for Canada; FN for other foreign juris		E
	Or for Canada, 114 for Calci foreign juris	<u>D</u>	ഥ

## GENERAL INSTRUCTIONS

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et sec. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

**ATTENTION** 

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENTIFIC	CATION DATA		
2. Enter the information reques	sted for the follow	ing:	<del></del>		
-		r has been organized within	=		
<ul> <li>Each beneficial owners</li> <li>of the issuer;</li> </ul>	er having the powe	er to vote or dispose, or dire	ct the vote or disposition o	f, 10% or more of	a class of equity securities
<ul> <li>Each executive office</li> </ul>	er and director of c	orporate issuers and of corp	orate general and managing	partners of partner	rship issuers; and
<ul> <li>Each general and ma</li> </ul>	naging partner of p	partnership issuers.			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	Manager
Full Name (Last name first, if i MFR-V MM, LLC	ndividual)	<del>-</del>	· · · · · · · · · · · · · · · · · · ·		
Business or Residence Address	(Number and St	reet, City, State, Zip Code)			
735 Lake Street East,	Wayzata, MN	55391			
Check Box(es) that Apply:	⊠ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Marhula, Daren C.	ndividual)				
Business or Residence Address	(Number and St	reet, City, State, Zip Code)			
735 Lake Street East,	Wayzata, MN	55391			
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if i England, Brad F.	ndividual)				
Business or Residence Address	(Number and St	reet, City, State, Zip Code)	*****		
735 Lake Street East,	Wayzata, MN	55391			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if i Donahoe, Mark T.	ndividual)				
Business or Residence Address	(Number and St	reet, City, State, Zip Code)			
735 Lake Street East,	Wayzata, MN	55391			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and St	reet, City, State, Zip Code)	···		1
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	(Number and St	reet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	s (Number and St	reet, City, State, Zip Code)	<del></del>		
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				В. 1	NFORMA	TION ABO	UT OFFE	RING				
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l.	Has the issu	er sola, or c				i-accreattea lix, Column				****************		
1	What is the						_				<b>c</b> 7	N/A
2.	what is the	minimum i	avesiment u	nat will be a	iccepied iro	m any morv	iquai (		*****************	***************************************	<u></u>	N/A
3.	Does the off		•	-	-							
4.	Enter the in sion or simi to be listed list the nam or dealer, yo	lar remuner is an assoc e of the br	ation for so liated perso oker or dea	licitation of n or agent ler. If mor	f purchasers of a broker e than five	in connection dealer re (5) persons	on with sale egistered w to be listed	es of securite ith the SEC are associ	ies in the of and/or with ated person	ffering. If a th a state of	person r states, broker	
Full Nar	ne (Last name	first, if ind	lividual)									
Business	s or Residence	e Address (	Number and	d Street, Ci	y, State, Zip	Code)						
Name of	Associated E	Broker or Do	ealer			<del></del>						
States in	Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
(Cl	eck "All State	es" or checl	c individual	States)								All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
				[IV]	[01]	[ 4 1 ]	נאאן	[WA]	[ 44 4 ]	[** _ ]	["1]	
Full Nar	ne (Last name	tirst, if inc	lividual)									
	s or Residence			d Street, Cit	y, State, Zip	Code)					- · · ·	
Name of	f Associated F	Broker or De	ealer									
States in	Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
(Cl	eck "All Stat	es" or checl	c individual	States)	*************	,				******		All States
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Full Nar	ne (Last name	first, if ind	lividual)					<u> </u>				
Busines	s or Residence	Address (	Number and	d Street, Cir	ty, State, Zip	Code)			···	<u></u>		
Name of	Associated E	Broker or D	ealer									
States in	Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
(Cl	eck "All Stat	es" or checl	c individual	States)						******		All States
[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Alread Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify Class B Units )	\$ <u>1,323,529.41</u>	\$ <u>1,323,529.41</u>
	Total	\$ <u>1,323,529.41</u>	\$ <u>1,323,529.41</u>
2.	Answer also in Appendix, Column 3, if filing under ULOE.  Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indi-		
	cate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amour of Purchases
	Accredited Investors	1	\$ <u>1,323,529.41</u>
	Non-accredited Investors		\$
	Total (for filings under Role 504 only)		\$
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securi-		
	ties sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
1	·Type of offering	Security	Sold
٠. ـ)	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	🛛	\$ <u>1,000</u>
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	⊠	s 1,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMBI	er of investors, expenses and of	JE OI TRO	CLLDD		
	b. Enter the difference between the aggregate l and total expenses furnished in response to "adjusted gross proceeds to the issuer."	o Part C - Question 4.a. This difference	e is the		\$ <u>1,322,529.41</u>	
5.	Indicate below the amount of the adjusted gross peach of the purposes shown. If the amoestimate and check the box to the left of the est the adjusted gross proceeds to the issuer set to	unt for the purpose is not known, furn timate. The total of the payments listed mu	nish an st equal above.	syments to		
			D	Officers, irectors, & Affiliates	Payments to Others	
	Salaries and fees		□ <b>\$</b>		□ \$	
	Purchase of real estate		□ \$		□ s	
	Purchase, rental or leasing and installation o	f machinery and equipment	□ \$		<b>S</b>	
	Construction or leasing of plant buildings an	nd facilities	□ \$		□ <b>\$</b>	
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)		Пς		□ \$	
					□ \$	
	• •					
	<u> </u>					
			s		□ s	
	Total Payments Listed (column totals added	n		<b>⊠</b> \$ <u>1</u>	1,322,529.41	
<del></del>		D. FEDERAL SIGNATURE	•			
followin	uer has duly caused this notice to be signed by ig signature constitutes an undertaking by the is its staff, the information furnished by the issuer	ssuer to furnish to the U.S. Securities and to any non-accredited investor pursuant to	i Exchange paragraph (	Commissio	on, upon written re-	
Issuer	(Print or Type)	Signature		Date		
MFR	Partners V, LLC			Septem	ber <u>//</u> , 2007	
Name	of Signer (Print or Type)	Title of Signer (Print or Type)				
Darei	1 C. Marhula	Director of MFR-V MM, LLC, the	Manager o	of the Issu	er	

 $\mathcal{END}$ 

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)